

# CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH

WALTER M. DICKIE, M.D., Director

## Weekly Bulletin



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GUY P. JONES  
EDITOR

## California's Suicide Rate is High

The suicide rate of California has always been high as compared with the suicide rate for most of the other states. The year 1928, in fact, brought the highest suicide rate that has ever been recorded for this state, more than 30 individuals out of every 100,000 of the population having died at their own hands. During the past five years there has been an increase in the California suicide rate each year, the numbers of such deaths having increased from 1090 in the year 1924 to 1330 in the year 1928. In the United States in the year 1926 there were 13,410 suicides, 12.8 per 100,000 population, less than half of the California rate for the same year. About 60 per cent of all suicides occur in the cities of the state. San Francisco, San Diego, Stockton and Sacramento had exceptionally high suicide rates last year. In San Diego more than 51 persons out of every 100,000 of the population committed suicide. The rate for Stockton was about 45 per 100,000, and that for San Francisco 41.7 per 100,000 population.

The exact reasons for the high suicide rates in certain cities are not clear. Some of the factors involved, however, are:

1. The migration of large numbers of invalids to the state.
2. The migration of large numbers of casual laborers who are past middle age and who are without family or home ties.
3. The mental disturbances due to the strain that comes under modern living conditions.

Most suicides in California take their lives by means of firearms. The use of poisonous gases is the next most commonly used means of suicide. Hanging or strangulation is third, and poisoning is fourth in popularity among suicides. The most uncommon means of suicide is crushing. Drowning and jumping from high places take about fifty lives each annually.

Most suicides are between the ages of 45 and 54 years, although nearly as many occur among those who are between 35 and 44 years of age. Very few under 20 years of age destroy themselves, but a considerable number of individuals who are past 65 years of age commit suicide each year.

This unenviable suicide record is shared by other western states and cities, particularly those on the Pacific Coast. To determine the exact cause for these high rates would require most extensive and elaborate research. We are able only to guess at the complex factors that may be involved. Suicide, however, must be considered as a phenomenon and a decided departure from the normal. The fact, however, that 1330 residents of the state committed suicide last year focuses attention upon the problems that are associated with the causes that bring an individual to a point where he is willing to destroy his own life. Self-preservation is one of the strongest inherent instincts and the factors that may be powerful enough to destroy this instinct should be known and definite steps should be taken to counteract them, if it may be possible.



## SUICIDES IN CALIFORNIA, 1924-1928

Specific means	1928	1927	1926	1925	1924
Solid or liquid poisons.....	154	209	193	169	217
Corrosives.....	65	37	6	6	10
Poisonous gas.....	230	218	231	228	184
Hanging or strangulation.....	169	146	133	120	117
Drowning.....	48	52	51	61	40
Firearms.....	506	478	387	402	397
Cutting or piercing instruments.....	92	77	75	76	73
Jumping from high places.....	46	32	25	32	33
Crushing.....	13	8	6	7	11
Other suicides.....	7	9	11	10	8
Totals.....	1330	1266	1118	1109	1090
Rate per 100,000 population.....	30.7	29.9	27.7	27.5	26.3

## SUICIDES IN CERTAIN CALIFORNIA CITIES, 1924-1928

	1928	1927	1926	1925	1924
Los Angeles.....	290	265	283	263	232
San Francisco.....	244	260	199	196	212
Oakland.....	91	78	61	69	73
Sacramento.....	24	38	34	39	30
San Diego.....	54	55	48	44	43
Berkeley.....	14	8	6	9	13
Long Beach.....	22	14	17	17	19
Pasadena.....	4	14	13	11	11
Stockton.....	23	17	6	22	9
Fresno.....	11	14	6	4	10
Totals.....	777	763	673	674	652

## HEALTH OFFICERS WILL MEET IN OAKLAND

The regular annual meeting of the health officers of California will be held in Oakland, October 7-11, 1929. This meeting will be held, as usual, in conjunction with the annual conference of the League of California Municipalities. All sessions will be held in the Hotel Oakland.

The program, which is now in course of preparation, will cover many important problems in public health administration in California communities. It is doubtful if the state has ever before been faced with so many health problems related to the importation of communicable and infectious diseases from other countries. The importation of epidemic meningitis from oriental ports is an important problem which has recently troubled many health officers throughout the state. It is essential for the protection of community health that health officers be fully advised of these diseases and of the safeguards that may be erected against their invasion. For these reasons alone a conference at the present time is of the greatest importance.

It is the intention of the program committee to provide a large number of round table discussions in which health officers will have opportunity to exchange opinions in methods of reaching practical solutions of many common and perplexing everyday problems in public health administration.

As soon as the program committee has finished the preparation of the program for the conference, it will be printed in this publication. It is hoped that there will be a large attendance of health officers, public health nurses, sanitary inspectors and all

other individuals who may be employed in public health work.

## TYPHUS FEVER CASE REPORTED IN NORTHERN CALIFORNIA

A woman, past middle age, arrived in Stockton recently from Texas, having crossed the border into Mexico while en route. Before her arrival in Stockton she complained that she felt somewhat languid and not particularly anxious to travel by automobile. She suffered a distinct chill followed by fever, which was followed by coughing and the appearance of a number of rose spots, which became quite profuse and well distributed over the entire body. It was thought at first that it might be a case of typhoid fever, but the run of temperature, pulse, the profusion of the rose spots and the similarity of the rash to that of typhus fever aroused the suspicions of the attending physicians and the health officer, with the result that the case was pronounced one of typhus fever. A positive Weil-Felix test was obtained, but tests on guinea pigs with blood inoculations from the patient produced negative results.

According to the history of the case, the patient left her home in a small town of Texas, where she had lived for six years, stopping at El Paso May 24th. During the day she took a street car ride across the Mexican border, spending some time in Juarez, returning to El Paso at night. The hotel where the patient stopped was very neat and clean. On May 25th she proceeded to Los Angeles, where she spent several days. She arrived at Yosemite May 30th and complained that she felt chilly during a stay there. The patient arrived in Stockton on May 31st, and on June 3d complained of languidness. On June 4th she had a distinct chill, followed by a fever. A physician was called on June 6th, and on the following day came the appearance of the rose spots, which, on June 9th, had become very profuse. The patient's temperature dropped to normal on June 19th, possibly fifteen days from the time of the onset. The patient is of a superior type, and the evidence would indicate that the disease was picked up on her trip to the Mexican border. Recent public health reports indicate that endemic typhus fever may be transmitted by means other than the body louse, and it would seem that this case must have been contracted in some other manner.

One of the chief aims of treatment is to keep the resistance of the body cells high so that the tubercle bacilli can not escape and become implanted in new tissue.—F. M. Pottenger.



## EXAMINATION FOR PUBLIC HEALTH NURSES ANNOUNCED

The next examination for public health nursing certificate will be held in San Francisco and Los Angeles on Saturday, September 21, 1929.

Applications to take this examination may be obtained from the Los Angeles, Sacramento or San Francisco offices and must be filed in the San Francisco office of the State Department of Public Health, Room 337, State Building, not later than September 1, 1929.

ADELAIDE BROWN, M.D.,  
Chairman Committee on Public  
Health Nursing, State Board  
of Public Health.

## SOME ELECTRICAL REFRIGERATORS CON- STITUTE HEALTH MENACE

It would appear that about eight types of electrical refrigerators out of thirty-five now on the market use methyl chloride, an extremely poisonous gas, as a refrigerant. Devices using this gas, and which develop leaks, may produce a severe illness and death. In Chicago, during the past year, twenty-five people have been poisoned by leakage of this gas from their refrigerators, and seven of this number have died. Methyl chloride is colorless and odorless, and its victim is overcome without realizing that he is breathing the deadly fumes. Manufacturers of electrical refrigerators in which this poisonous gas is used are greatly concerned over the situation, and most of them are taking steps to substitute other chemicals for refrigerative purposes. Firms using methyl chloride in their machines, during the week of July 15th, voluntarily removed the methyl chloride from half of the seventy-five thousand electrical refrigerators in Chicago and substituted sulphur dioxide in its stead. It is understood that comparatively few electrical refrigerators using this poisonous gas have been installed on the Pacific coast.

Secretary of Commerce Lamont has called a conference, to be held in Washington in the near future, at which the United States Bureau of Mines, the Bureau of Standards and the United States Public Health Service will consider safeguards against poisonous gases used in chemical refrigeration. It is expected that a general meeting, to which representatives of the mechanical refrigeration industry will be invited, will follow the original conference. It is certain that both methyl bromide and methyl chloride do not possess sufficient warning properties to pre-

vent serious accidents, and, if they are to be used at all, there should be warning agents that would indicate, immediately, the appearance of any leaks of the poisonous compound. Health officers of the state are asked to be on the alert to determine any cases of poisoning that may occur from this source, and to advise the State Department of Public Health without delay of any cases that may be, through any possibility, traced to such gas leakage from mechanical refrigerators.

## LIST OF DISEASES REPORTABLE BY LAW

ANTHRAX	MUMPS
BERI-BERI	OPHTHALMIA NEONATORUM
BOTULISM	PARATYPHOID FEVER
CEREBROSPINAL MENINGITIS (Epidemic)	PELLAGRA
CHICKENPOX	PLAGUE
CHOLERA, ASIATIC	PNEUMONIA (Lobar)
COCCIDIOIDAL GRANULOMA	POLIOMYELITIS
DENGUE	RABIES (Animal)
DIPHTHERIA	RABIES (Human)
DYSENTERY (Amoebic)	ROCKY MOUNTAIN
DYSENTERY (Bacillary)	SPOTTED (or Tick) FEVER
ENCEPHALITIS (Epidemic)	SCARLET FEVER
ERYSIPELAS	SMALLPOX
FLUKES	SYPHILIS
FOOD POISONING	TETANUS
GERMAN MEASLES	TRACHOMA
GLANDERS	TUBERCULOSIS
GONOCOCCUS INFECTION*	TULAREMIA
HOOKWORM	TYPHOID FEVER
INFLUENZA	TYPHUS FEVER
JAUNDICE (Infectious)	UNDULANT (Malta) FEVER
LEPROSY	WHOOPING COUGH
MALARIA	YELLOW FEVER
MEASLES	

## QUARANTINABLE DISEASES

CEREBROSPINAL MENINGITIS (Epidemic)	POLIOMYELITIS
CHOLERA, ASIATIC	SCARLET FEVER
DIPHTHERIA	SMALLPOX
ENCEPHALITIS (Epidemic)	TYPHOID FEVER
LEPROSY	TYPHUS FEVER
PLAGUE	YELLOW FEVER

## MORBIDITY\*

### Diphtheria.

29 cases of diphtheria have been reported, as follows: Berkeley 1, Oakland 2, Fresno County 1, Los Angeles County 4, Arcadia 1, Burbank 1, Los Angeles 10, Whittier 1, Gustine 1, Napa 1, Orange 2, San Diego 2, San Francisco 2.

### Scarlet Fever.

107 cases of scarlet fever have been reported, as follows: Alameda 2, Berkeley 3, Oakland 2, Fresno County 3, Fresno 3, El Centro 1, Kern County 3, Bakersfield 1, Lassen County 1, Los Angeles County 7, Alhambra 1, Compton 1, Glendale 2, Inglewood 1, Long Beach 3, Los Angeles 14, Pasadena 1, Bell 1, Gustine 1, Los Banos 1, Monterey County 2, Huntington Beach 1, Sacramento County 1, Sacramento 3, San Francisco 10, San Joaquin County 5, Lodi 1, Stockton 3, San Mateo County 1, Daly City 1, San Bruno 2, Santa Barbara County 6, Santa Clara County 3, San Jose 3, Sunnyvale 2, Santa Cruz County 1, Solano County 1, Sonoma County 7.

### Measles.

43 cases of measles have been reported, as follows: Alameda 1, Berkeley 1, Oakland 5, Burbank 1, Long Beach 4, Los



Angeles 12, Pasadena 4, South Gate 1, Los Banos 1, Monterey 1, Santa Ana 1, Sacramento 2, San Francisco 3, Stockton 1, Santa Barbara County 1, Santa Clara County 4.

#### Smallpox.

20 cases of smallpox have been reported, as follows: Alameda 2, Berkeley 1, Oakland 1, Eureka 1, Kings County 4, Long Beach 3, Signal Hill 1, Monterey County 1, Sacramento 1, Manteca 1, Watsonville 2, Riverbank 2.

#### Typhoid Fever.

20 cases of typhoid fever have been reported, as follows: Eureka 1, Brawley 1, Los Angeles 2, Whittier 1, Anaheim 1, Riverside 1, Sacramento County 1, San Diego 2, San Francisco 1, San Joaquin County 1, Sonoma County 1, Tulare County 5, California 2.\*\*

#### Whooping Cough.

172 cases of whooping cough have been reported, as follows: Alameda 3, Berkeley 4, Oakland 13, Crescent City 1, Kern County 1, Susanville 1, Los Angeles County 20, Alhambra 3, Glendale 3, Long Beach 2, Los Angeles 39, Monrovia 2, Pasadena 5, Whittier 2, Lynwood 2, South Gate 2, Maywood 1, Anaheim 1, Brea 6, Fullerton 1, Santa Ana 1, La Habra 3, Riverside 2, Sacramento 15, San Diego County 5, National City 1, San Diego 7, San Francisco 8, San Joaquin County 4, Lodi 1, Stockton 6, Tracy 1, Santa Barbara County 1, Lompoc 1, Palo Alto 2, Tulare County 2.

#### Meningitis (Epidemic).

17 cases of epidemic meningitis have been reported, as follows: Oakland 1, Los Angeles 1, Mill Valley 1, Monterey

County 1, Napa 1, Sacramento 2, San Diego 1, San Francisco 2, Lodi 1, Stockton 2, Colma 1, Lompoc 1, Santa Cruz 1, Oxnard 1.

#### Poliomyelitis.

4 cases of poliomyelitis have been reported, as follows: Los Angeles county 2, Alhambra 1, Los Angeles 1.

#### Encephalitis (Epidemic)

San Francisco reported two cases of epidemic encephalitis.

#### Food Poisoning.

Los Angeles reported one case of food poisoning.

#### Undulant Fever.

2 cases of undulant fever have been reported, as follows: Fullerton 1, Porterville 1.

#### Tularemia.

2 cases of tularemia have been reported, as follows: Lassen County 1, Monterey County 1.

#### Coccidioidal Granuloma.

3 cases of coccidioidal granuloma have been reported, as follows: Kern County 1, Los Angeles 1, California 1.\*\*

\* From reports received on July 29th and 30th for week ending July 27th.

\*\* Cases charged to "California" represent patients ill before entering the state or those who contracted their illness traveling about the state throughout the incubation period of the disease. These cases are not chargeable to any one locality.

### COMMUNICABLE DISEASE REPORTS

Disease	1929				1928			
	Week ending			Reports for week ending July 27 received by July 30	Week ending			Reports for week ending July 28 received by July 31
	July 6	July 13	July 20		July 7	July 14	July 21	
Actinomycosis.....	0	0	0	0	0	0	1	1
Chickenpox.....	104	116	83	65	98	112	92	61
Coccidioidal Granuloma.....	0	0	2	3	0	0	0	1
Dengue.....	1	0	0	0	0	0	0	0
Diphtheria.....	38	52	39	29	56	70	52	50
Dysentery (Amoebic).....	2	0	0	0	1	1	0	0
Dysentery (Bacillary).....	3	1	8	0	7	0	2	0
Encephalitis (Epidemic).....	1	1	3	2	0	0	1	0
Erysipelas.....	4	11	11	12	13	11	10	6
Food Poisoning.....	0	1	35	1	7	3	1	0
German Measles.....	5	14	17	4	40	32	25	22
Gonococcus Infection.....	94	94	135	90	113	106	134	192
Hookworm.....	0	0	0	0	0	1	1	0
Influenza.....	9	6	5	7	20	8	6	12
Jaundice (Epidemic).....	0	0	0	0	0	1	0	0
Malaria.....	0	2	2	3	4	1	1	0
Measles.....	74	81	44	43	23	20	24	19
Meningitis (Epidemic).....	13	5	15	17	1	2	3	7
Mumps.....	124	148	137	104	60	73	60	41
Ophthalmia Neonatorum.....	0	0	1	0	1	0	0	0
Paratyphoid Fever.....	2	2	2	0	1	2	6	2
Pellagra.....	1	1	2	0	2	1	2	6
Pneumonia (Lobar).....	43	35	34	22	27	25	23	24
Poliomyelitis.....	4	5	6	4	6	6	1	7
Rabies (Human).....	0	0	0	0	1	0	0	0
Rabies (Animal).....	18	14	21	6	11	18	6	7
Rocky Mt. Spotted Fever.....	0	5	0	0	0	0	0	0
Scarlet Fever.....	131	103	100	107	65	69	71	57
Smallpox.....	33	16	27	20	24	4	24	15
Syphilis.....	211	104	131	136	109	122	125	251
Tetanus.....	1	0	1	3	4	0	5	3
Trachoma.....	0	2	2	1	0	0	2	0
Tularemia.....	1	0	0	2	0	0	0	1
Tuberculosis.....	154	167	177	196	175	240	227	190
Typhoid Fever.....	6	14	13	20	19	14	11	10
Undulant Fever.....	1	0	0	2	0	0	0	0
Whooping Cough.....	134	144	164	172	135	209	230	189
Totals.....	1,212	1,144	1,217	1,071	1,023	1,151	1,146	1,174

**Epidemic meningitis is not showing the same reduced prevalence that it showed early in July.**

**Diphtheria is at low ebb.**

**Typhoid is in its seasonal rise.**

**Two cases of undulant fever were reported last week.**

**Two cases of tularemia were recorded during the past month.**